

IP-P



H. M. Sinai

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B

24 November 2005

Mail Stop ISSUE FEE
Commissioner for Patents
P. O. BOX 1450
Alexandria, Virginia 22313-1450
USA

Dear Sirs,

Re: FEE TRANSMITTAL – Application No: 09/831,944

We enclose a CONFIRMATION copy of a fax sent to you on November 23 and 24, 2005.

The enclosed copies include the following 3 pages:

1. copy of Fax letter, dated November 24, 2005
2. copy of **REVISED** Issue Fee Transmittal Form (PTOL-85), dated November 24, 2005
3. copy of Credit card details on Form PTO-2038, dated November 23, 2005

If there are any queries regarding this communication and/or payment, please advise us by Fax 800-243-2384 (USA) or by Email: hsinai@ip-partnership.com

Yours sincerely,

Henry Sinai
IP-PARTNERSHIP
[Customer No: 35650]

Encls:

USPTO-conf-fax-issue fee-sp2.doc

IP-P

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Patent Attorneys

November 24, 2005

Fax



CONFIRMATION

COPY

To: MAIL STOP-ISSUE FEE **From:** *Henry Sinai*

Fax: +1 571 273-2885 **Pages:** 2 (incl. this page)

Company: USPTO- MAIL STOP-SSUE FEE

Re: ISSUE FEE PAYMENT Application No: 09/831,944

☒ **Urgent** ☐ **For Review** ☐ **Please Comment** ☒ **Please CONFIRM**

Dear Sirs,

Please find attached a **REVISED** Issue Fee Transmittal Form (PTOL-85) for
Application No.: 09/831,944.

Please note:

1. This **REVISED** form includes details of the Assignee (para. 3) and replaces the Transmittal Form dated November 23, 2005.
2. Payment was made by Credit card- details were submitted on Form PTO-2038, dated November 23, 2005

Please process the payment and confirm receipt of this fax.

If there are any queries regarding this communication and/or payment, please advise us by Fax 800-243-2384 (USA).

Yours sincerely,

Henry Sinai
IP-PARTNERSHIP
[Customer No: 35650]

COPY

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571) 273-2885

or **Fax**

INSTRUCTIONS: This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1. (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

(CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address))

35650

7590

09/02/2005

HENRY M. SINAI
(IP-PARTNERSHIP)
P.O. BOX 669
RAANANA, 43350
ISRAEL

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop **ISSUE FEE** address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

HENRY M. SINAI	(Depositor's name)
<i>[Signature]</i>	(Signature)
November 24, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/831,944	12/12/2001	Israel Sarussi	P-2040-US	9891

TITLE OF INVENTION: SENSOR FOR RADIANCE BASED DIAGNOSTICS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	12/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WINAKUR, ERIC FRANK	3736	600-310000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **IP-PARTNERSHIP**

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

S.P.O. MEDICAL EQUIPMENT LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ASHKELON, ISRAELPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

[Signature]
HENRY M. SINAI

Date

November 24, 2005

Typed or printed name

Registration No. _____

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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